



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Complete if Known

Application Number	10/019,676
Filing Date	April 8, 2002
First Named Inventor	LI
Examiner Name	Zachariah Lucas
Group Art Unit	1648
Attorney Docket Number	2977-118
Confirmation Number	7819

## ENCLOSURES (check all that apply)

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to TC                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences     |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter  |
| <input checked="" type="checkbox"/> Extension of Time Request                | <input type="checkbox"/> Terminal Disclaimer  | <input type="checkbox"/> Other Enclosure(s) (please identify below):                    |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund   |   |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s)  |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> Landscape Table on CD  |   |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    |   |   |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |   |

REMARKS:

SUBMITTED BY		Complete (if applicable)			
NAME AND REG. NUMBER	Patrick T. Skacel, Reg. No. 47,948				
SIGNATURE		DATE	September 23, 2005	DEPOSIT ACCOUNT USER ID	02-2135

<b>FEE TRANSMITTAL</b> for FY 2005 (Large Entity)		Complete if Known					
		Application Number		10/019,676			
		Filing Date		April 8, 2002			
		First Named Inventor		LI			
		Examiner Name		Zachariah Lucas			
		Group Art Unit		1648			
<input type="checkbox"/> Applicant claims small entity status		Attorney Docket Number		2977-118			
Total Amount of Payment		(\$1020.00		Confirmation Number		7819	

#### METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge the fees indicated below or credit overpayment to Deposit Account Number 02-2135 in the name of Rothwell, Figg, Ernst & Manbeck
- ☒ Charge any additional fee required under 37 CFR 1.16 and 1.17 to Deposit Account No. 02-2135.
2. ☐ Payment by check enclosed

#### FEE CALCULATION

##### 1. FILING, SEARCH AND EXAMINATION FEES

Code	Fee	Fee Description	Fee Paid
1001	300	Utility Filing Fee	[ ]
	790	filed before Dec. 8, 2004	[ ]
1111	500	Utility Search Fee	[ ]
1311	200	Utility Examination Fee	[ ]
1002	200	Design Filing Fee	[ ]
	350	filed before Dec. 8, 2004	[ ]
1112	100	Design Search Fee	[ ]
1312	130	Design Examination Fee	[ ]
1003	200	Plant Filing Fee	[ ]
	550	filed before Dec. 8, 2004	[ ]
1113	300	Plant Search Fee	[ ]
1313	160	Plant Examination Fee	[ ]
1004	300	Reissue Filing Fee	[ ]
	790	filed before Dec. 8, 2004	[ ]
1114	500	Reissue Search Filing Fee	[ ]
1314	600	Reissue Examination Fee	[ ]
1005	200	Provisional Filing Fee	[ ]

**SUBTOTAL \$0**

##### 2. CLAIMS

	Extra Claims	Fee	Fee Paid
Total Claims [ ] - 20* = [ ] x		\$50 = [ ]	
Independent Claims [ ] - 3* = [ ] x		200 = [ ]	
Multiple Dependent Claims +		360 = [ ]	

\*or number previously paid, if greater

**SUBTOTAL \$0**

##### 3. APPLICATION SIZE FEE

Total Sheets [ ] - 100 = [ ]/50 = [ ]\*\* x \$250 =

\*\* Number of each additional 50 or fraction thereof

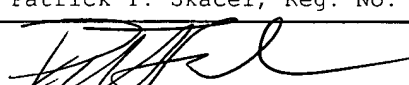
**SUBTOTAL \$0**

#### FEE CALCULATION (continued)

##### 4. ADDITIONAL FEES

Fee Code	Fee Paid	Fee Description	Fee Paid
1051	130	Surcharge - late filing fee or oath	[ ]
1052	50	Surcharge - late provisional filing fee or cover sheet	[ ]
1053	130	Non-English specification	[ ]
1812	2,520	For filing a request for reexamination	[ ]
1804	920	Requesting publication of SIR prior to Examiner action	[ ]
1805	1,840	Requesting publication of SIR after Examiner action (reduced by basic filing fee paid)	[ ]
1251	120	Extension for reply within first month	[ ]
1252	450	Extension for reply within second month	[ ]
1253	1,020	Extension for reply within third month	[1020]
1254	1,590	Extension for reply within fourth month	[ ]
1255	2,160	Extension for reply within fifth month	[ ]
1401	500	Notice of Appeal	[ ]
1402	500	Filing a brief in support of an appeal	[ ]
1403	1,000	Request for Oral Hearing	[ ]
1451	1,510	Petition to institute a public use proceeding	[ ]
1452	500	Petition to revive -unavoidable	[ ]
1453	1,500	Petition to revive - unintentional	[ ]
1807	50	Processing fee under 37 CFR 1.17(q)	[ ]
1806	180	Submission of Information Disclosure Statement	[ ]
1809	790	Filing a submission after final rejection (37 CFR 1.29(a))	[ ]
1810	790	For each additional invention to be examined (37 CFR 1.129(b))	[ ]
1801	790	Request for Continued Examination (RCE)	[ ]
1802	900	Request for expedited examination of a design application	[ ]
1504	300	Publication fee for early, voluntary, or normal publication	[ ]
1505	300	Publication fee for republication	[ ]
1455	200	Filing application for patent term adjustment	[ ]
1456	400	Request for reinstatement of term reduced	[ ]
1814	130	Statutory Disclaimer	[ ]
Other fee (specify)			[ ]

**SUBTOTAL \$1020.00**

SUBMITTED BY				Complete (if applicable)	
NAME AND REG. NUMBER		Patrick T. Skacel, Reg. No. 47,948			
SIGNATURE		DATE	September 23, 2005	DEPOSIT ACCOUNT USER ID	02-2135